REFERRAL PROCEDURE FOR ADMISSION TO:

WORTHINGTON CRIPPLED CHILDREN'S SCHOOL Knollwood Drive R.R. #2 Worthington, Minnesota 56187

I. General Information

The Superintendent of Schools should use this procedure sheet as a guide in preparing referral information for admission of a handicapped child to the Crippled Children's School located in Worthington, Minnesota. Information should be forwarded by the child's resident district to the Special Education Section, Department of Education, State of Minnesota.

Worthington Crippled Children's School provides both residence care and an educational program for severely handicapped school age children who are educable. Total education for a physically handicapped child includes in addition to the academic and vocational program provision for physical, occupational and speech therapy where such services are deemed essential to the total development of the child.

II. Initial Identification and Eligibility of the Child

Children are accepted to the Worthington School when their educational needs cannot be met in the local school district due to a lack of necessary resources. Eligible children may include those handicapped from crippling conditions, various degrees of cerebral palsy and medically diagnosed severe speech disorders.

Application for admission to the School should be made by the child's parent or guardian to the school superintendent of the child's district of residence (county superintendent if applicable).

The resident district should fully develop the application and if appropriate request placement of the child in the residential facility by letter to the State Special Education Section.

III. Gathering and Compiling Records and Data

The school superintendent of the child's school district of residence is iritially responsible for gathering all necessary data and in establishing a multi-discipline team at the local level to examine the data and verify the recommendations for placement.

DATA NECESSARY TO COMPLETE AN APPLICATION:

- A. LETTER. If the decision of the local school board is that the child should be enrolled at the Worthington Crippled Children's School, the superintendent should forward all records to the Special Education Section of the State Department of Education and request approval. A statement that costs will be assumed by the home district should be incorporated in the correspondence.
- B. SOCIAL HISTOPY. Please contact your County Welfare Department with a request that they complete this history. The attached Social History Guide should be forwarded to the County Welfare Department (Code XVI-B-51a).

- C. MMDICAL HISTORY. Gather a complete medical history including a recent evaluation by an orthopedist, physiatrist, medical specialist, or a medical center such as Gillette State Hospital, Mayo Clinic, etc.
- D. PSYCHOLOGICAL EVALUATION. An individual assessment is required.
- E. <u>FDUCATIONAL HISTORY</u>. A concise but complete statement should be included summarizing the child's experiences in public school or related programs. i.e. kindergarten, Headstart, Daytime Activity Centers, summer camping programs, therapies received etc.

IV. Placement Approval

Approval for placement by the Commissioner of Education will be based on the recommendations of the local school board which includes a thorough review of the records and submittal of necessary information by the local superintendent of schools. Approval or disapproval will be made by the State Screening Committee which is composed of representatives of the Departments of Education, Health and Welfare, an orthopedist, a neurological specialist and Worthington Crippled Children's School administrators.

V. Costs

Each district sending one of their students to the Worthington program for handicapped children will be charged* for tuition, board and lodging; monthly statements are sent by the Worthington School District. At the end of the school year expenses will be pro-rated according to the number of days the student was enrolled. If costs are less than the monthly assessment, a refund will be made.

Districts should claim reimbursement for board and lodging at the rate of \$100. per month of \$900. per year. Application for reimbursement is made to the Transportation Section, Department of Education by the resident district. The resident district should also claim foundation aid for each day the student is in daily attendance at the Worthington School.

VI. Transportation

Transportation to Worthington is the responsibility of the student's parents. If difficulty seems to exist it may be possible for the County Welfare Department to assist in arranging transportation from a child's resident district to Worthington and/or return home.

Please contact either the Special Education Section or the Superintendent of Schools at Worthington, Minnesota to clarify any questions or procedures. We are anxious to assist you in planning for any handicapped child in your district who may need to attend the Worthington Residential Facility.

*Costs after State Special Education aids were paid during the 1968-69 school year averaged approximately \$355.00 per month per student. Additional funds available because of action of the 1969 legislature will reduce this cost. Please contact the Special Education Section for further information.

GUIDE FOR SCCIAL HISTORY OUTLINE

FOR

ADMISSION TO THE WORTHINGTON CRIPPLED CHILDREN'S SCHOOL Knollwood Drive RR #2 Worthington, Minnesota

I. General Information for Superintendent of Schools and County Welfare Director

This Social History Outline should be used as a guide by the local welfare department in preparing the social history for a family that is applying for admission of a child to the Residential School for Crippled Children in Worthington, Minnesota. Please forward this outline to the local welfare director. When completed, the social history should then be returned to the superintendent of schools of the district in which the child has residence for school purposes. Please refer to Code XVI-B-51 (exploratory memorandum to Superintendent of Schools and XVI-B-51a, Referal Outline Guide to Worthington Crippled Children's School).

II. Social History Cutline

- A. Child Status
 - 1. Name
 - 2. Birthdate
 - 3. Birthplace
 - 4. Present legal status (Is this child under state guardianship? Who has custody of child?)
 - 5. County Melfare Department Case Number
- B. Present Situation of Child
 - l. Handicap
 - a. Describe handicap.
 - b. How long has child had handicap?
 - c. What previous efforts has family made to help child? (Agencies contacted? Doctors, hospitals?)
 - d. How does child feel about his handicap? Family and community feelings about his handicap?
 - e. Is child aware of present placement plan? How does he feel about it?
 - 2. Current Personality and Behavior (Describe child as fully as possible.)
 - a. Is he shy, fearful, confused? Does he seem preoccupied, aloof, depressed? Does he feel unworthy or unloved? Tend to blame others for his difficulties? Is he aggressive, hyperactive, destructive; appear unable to control his behavior?
 - b. How does he respond to authority and limit-setting at home? At School? In community?
 - c. Can he make and sustain friendships? How does he relate to other children?
 - 3. Physical Development
 - a. Physical appearance: full description
 - b. Is present health good?
 - c. Height and weight
 - d. Are child's mental development and behavior normal for his age?
 - e. Describe previous illnesses, surgery, injuries that may be pertinent.

- 4. Present School Progress
 - a. Current grade
 - b. What is child's attitude toward school?
 - c. What are the child's learning problems?
 - d. What activities does the child perticipate in?
 - e. Have there been any school problems in the past?
 - f. Are there any problems that may interfere with his adjustment in placement.
- 5. Positive Interests and Achievements
 - a. Skills, hobbies, ambitions
 - b. What can child do for himself -- dressing, feeding, talking, etc.?
- C. Previous History of Child and Mother
 - 1. Difficulties during pregnancy and birth
 - 2. Developmental ages for weaning, walking, sitting, talking, toilet training and child's reaction to same.
 - 3. Physical, behavioral, social, and/or learning difficulties first noticed, and what was done at that time.
- D. Basic Family Status
 - 1. Give information on each member of basic family:
 - a. Name and address
 - b. Status in family (mother, father, etc.)
 - c. Health history
 - d. School history
 - e. Work history if any
 - f. Marital history: maiden name, dates of marriages and divorces
 - g. Personality and social adjustment
 - h. Contacts with any social agencies
 - i. Additional pertinent information
 - 2. Others living in the home
 - 3. Other persons significant to the family
- E. Description of home
 - 1. Structure, number of stories, number of rooms
 - 2. Does child have a room of his home? Bed of his own?
 - 3. Is outside play area available?
 - 4. Is there indoor plumbing?
 - 5. Additional pertinent information
- F. Availability of Medical Treatment
 - 1. Amount of contact with family doctor
 - 2. Amount of contact with family dentist
- G. Evaluation by Caseworker
 - 1. Attitude of family (especially parents) towards child, his handicap and his possible separation from home.
 - 2. What are the parents reasons for seeking this placement?
 - 3. In view of child's handicap, what do you think can be done for him in the community?
 - 4. Does admission to the residential school seem to be the best plan for this child?
 - 1. If yes, what needs (apart from school) will he have while in residence
 - 2. If no, what alternatives would you recommend that are feaseable in the local community.